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CONFIRMATION NO. 4238

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/776,955	02/11/2004	401	3751	
<b>RULE</b>				
<b>APPLICANTS</b> Diane C. Breidenbach, Smithtown, NY; Laurence W. Mille, Smithtown, NY; <i>HN</i>				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/515,956 02/29/2000 PAT 6,488,427 and is a CIP of 09/842,372 04/25/2001 ABN <i>HN</i>				
<b>** FOREIGN APPLICATIONS *****</b> UNITED STATES OF AMERICA PCT/US02/26230 08/17/2002 <i>HN</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 05/11/2004				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Allowance <i>HN</i> Acknowledged Examiner's Signature Initials		STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 30
INDEPENDENT CLAIMS 2				
<b>ADDRESS</b> Thomas A. O'Rourke Bodner & O'Rourke LLP 425 Broadhollow rd. #108 Melville, NY11747				
<b>TITLE</b> Lip product applicator				
<b>FILING FEE RECEIVED</b> 1275	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	